Docket, Hearing

From:

Andrew Kanter [andy_kanter@yahoo.com]

Sent:

Friday, September 14, 2012 5:04 PM

To:

NRCREP Resource

Subject:

Response from "Comment on NRC Documents"

Below is the result of your feedback form. It was submitted by

Andrew Kanter (andy kanter@yahoo.com) on Friday, September 14, 2012 at 17:03:57

Document_Title: Generic Environmental Impact Statement for License Renewal of Nuclear Plants: Supplement 38 Regarding Indian Point Nuclear Generating Unit Nos. 2 and 3 - Draft Report for Comment NUREG-1437, Supplement 38, Volume 4, Draft Report

Comments: Dear Nuclear Regulatory Commissioners:

I am a physician and live in upper Manhattan. I have a new 8 month old son and have been thinking a lot about what sort of planet I am going to leave him. I am writing to you today to strongly oppose relicensing of the Indian Point Reactors. I do not think it is possible for us to properly protect ourselves from a reactor accident, and we just don't need the power from those old, dangerous plants.

We performed sophisticated computer modeling of a significant Loss of Coolant accident at a nuclear reactor using the same software used by Federal Agencies including the Hazard Predication and Assessment Capability (HPAC) package from the Defense Threat Reduction Agency and the Consequences Assessment Tool Set (CATS) from the Federal Emergency Management Agency, that and real-world experiences from accidents such as Chernobyl and Fukushima, shows that Entergy's risk assessment for what sort of evacuation is required is not only optimistic, it is a fantasy.

Although a severe accident is unlikely, it is reasonably foreseeable. If a severe accident occurs, large releases of radiation (and exposure to populations) would be expected to extend a significant distance from the plants, even beyond the 50 mile limit recommended for Americans in Japan. Exposure to radioactive contamination from nuclear reactor accidents results not only from exposure to airborne radionuclides such as I-131 in the plume, but also from groundshine from deposited gamma and beta radiation emitters, and from the ingestion and inhalation of alpha, beta and gamma- emitting radionuclides. These internal exposures and groundshine are possible long after the plume has passed. Sheltering does not protect the population from this longer-term exposure, nor does it actually remove the requirement for eventual evacuation. Therefore, the effects of an accident DO require evacuation planning for up to 17 or 20 Million people in metro NYC.

A study in 2003 by James Lee Witt associates demonstrated that host communities are unlikely to be prepared to absorb the influx of people from the urban evacuation areas, and if you assume even a 10% available surge capacity requirement, you would need a hospital bed capacity of 290,000 beds to absorb these patients. For comparison, this is three times the number of all available hospital beds in the states of New York, New Jersey and Connecticut combined!

For these reasons and many more, there can be no realistic protection of the populations from a serious accident at Indian Point. And it is not enough to say that there will never be another Fukushima, or another Chernobyl or another Three Mile Island. There always will be

Implete dey-038

ranother, and each will be different from those that came before and also will not be in the design basis for the plant. The recent study from the Max Plank institute in Germany would predict a level 7 type accident every decade or so. This is clearly unacceptable.

The Indian Point Reactors will have to close some day. That is a fact. The question is whether we will continue to operate them past their life expectancy, with increasing risk and increasing potential for a catastrophic accident. The answer must be no. The time to shut down the reactors is now. Studies of the energy requirements for the region show that this can be tolerated. If there is another major release of radioactivity, or a significant accident at the Indian Point site, it not only would be terrible for NY, but it would be the end of the NRC and all of nuclear power in the US. I implore you to do the right thing and let these reactors shut down as they should.

Sincerely, Andrew S. Kanter, MD MPH FACMI President, Physicians for Social Responsibility

organization: PSR

address1: 160 Cabrini Blvd. #86

address2:

city: NY

state: NY

zip: 10033

country: USA

phone:

DOCKETED USNRC

September 14, 2012 (5:04 p.m.)

OFFICE OF SECRETARY RULEMAKINGS AND ADJUDICATIONS STAFF